

# CHEMIST & DRUGGIST

the newsweekly for pharmacy

July 21, 1990

**Get ready for  
a Deep Heat  
wave!**



- Undisputed brand leader
- Sells twice as fast as any competitor
- The only growing rubefacient

Mentholatum

***The Leaders In Topical Pain Relief.***

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**PGC agrees  
generics deal  
for Tariff**

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**10.41pc discount  
recovery and new  
fees from August**

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**Astill attacks  
branded generics  
after complaints**

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**Public attitudes  
to healthcare**

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**Typharm—taking  
nostrums national**

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**Savory & Moore  
in the dock for  
accident at work**

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#### Lyclear Creme Rinse Prescribing Information

**Presentation** Each 59ml bottle of Lyclear contains 1% w/w permethrin plus 20% w/w isopropanol in a creme-rinse base. **Uses** For the treatment of head louse (*Pediculus humanus capitis*) infections. **Dosage and Administration** Adults and children over 2 years. Shampoo hair as normal, rinse, and towel dry. Shake the bottle thoroughly and apply enough Lyclear to saturate the hair and scalp. Leave on the hair for 10 minutes, then rinse thoroughly with water and dry in the usual way. **Contra-indications, warnings, etc.** *Contra-indications:* Hypersensitivity to permethrins, other synthetic pyrethroids, pyrethrins or chrysanthemums. **Precautions:** For external use only. Wear gloves for multiple applications. Only use in children under 2 years under medical supervision. Use in pregnancy only if potential benefit outweighs the possibility of unknown risks. **Side- and adverse effects:** Adverse reactions are infrequent, mild and transitory, and are usually also symptoms of head louse infection. **Basic NHS Cost:** £1.08. **Legal Category [P].** Further information available on request. **The Wellcome Foundation Ltd.,** Crewe, Cheshire CW1 1UB. Lyclear is a Trade mark.



Wellcome

# LYCLEAR

Permethrin

## A single 10-minute treatment for head lice.



\*99% overall cure rate after one week.

Eradicating head lice hasn't always been easy or pleasant. But now Wellcome presents a new pediculicide. It's called Lyclear.

Based on the tried-and-tested permethrin compound, new Lyclear is highly effective as a single application creme rinse, and used as easily as a normal hair conditioner.

In fact, just one ten minute Lyclear treatment is sufficient to kill lice and eggs, with the comparative effectiveness of either a 2 or 12 hour malathion application. What's more, Lyclear's strong residual capacity can protect against reinfestation for as long as 6 weeks after use.

Although highly effective, Lyclear has a

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With its recognised cosmetic advantages together with its proven clinical potency, Lyclear is an ideal head lice treatment for every member of the family.

Lyclear is a head lice treatment you can confidently recommend to be quick, effective, and pleasant to use.

NEW  
**LYCLEAR**  
C r e m e R i n s e

Kills head lice in just one 10-minute application.



# CHEMIST & DRUGGIST

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RETAIL CHEMIST

Editor: John Skelton, MPS  
Deputy Editor: Patrick Grice, MPS  
Assistant Editor: Robert Darracott, MPS  
Contributing Editor: Adrienne de Mont, MPS

Technical Editor: Eileen Wilson, MPS  
Business Editor: Zachary Goldring, MSc  
Beauty Editor:

Carol Henderson MA (Hons)  
Reporters: Charlotte Coker, MPS  
Jane Feely, PhD, MPS

Art Editor: Tony Lamb  
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Frances Shortland  
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Advertisement Executive:

Julian de Bruxelles  
Production: Shirley Wilson  
Publisher: Ronald Salmon, FPS  
Director: Felim O'Brien

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# COMMENT

While contractors in England and Wales face an increase in the average discount clawback to 10.4 per cent, set at a higher than necessary rate to cover the elapsed period from April to August, pharmacists in Scotland face little effective change. And the reason is that the Pharmaceutical General Council, working with the Scottish Health Department, has identified where the major discounts are coming from and effectively removed them from the calculations. By creating a new section in the Scottish Drug Tariff listing the 60 most heavily discounted generics, the PGC has frozen the discount rate. PSNC accepts that the discount shown by last year's inquiry in England and Wales was substantially higher due to the low prices being offered on these drugs.

What the Scottish move has highlighted quite clearly is the downward spiral that price cutting in the generics market precipitates. By creating a special section in the Tariff, which can be amended reasonably rapidly in response to market changes, pharmacists will still be encouraged to buy cheaply, yet some of the heat should be taken out of the market on the manufacturers side. If pharmacists are not allowed to benefit from their

economical buying, then it makes sense to reduce the level of discount recovery to a minimum. The PGC have good reason to feel pleased with themselves. A more realistic pricing structure for generics is long overdue, and the sooner PSNC can negotiate a similar deal the better.

While sanity seems to be returning to one section of the market, the question of so called branded generics is causing rising irritation elsewhere. Such products are bought in at favourable bulk prices, which are then artificially inflated and drugs sold out under a "brand name". If prescribed as such the PPA has to reimburse at the full list price, costing the NHS more with no consequent benefit to the patient. The NPA would like to see pharmacists allowed to ignore branded generics, dispensing whatever true generic they held. However, it might be difficult to know where to draw the line between this and generic substitution. Adding such products to the limited list might provide an answer, although it would be necessary to broaden the classes of preparations that could be included. Whatever the solution, few will argue with PSNC's sentiments, that the Department of Health should get to grips with the situation.



# PGC fixes discount rate with generics deal

There will be little change to the discount recovery suffered by Scottish contractors as a result of the recent discount inquiry, the Pharmaceutical General Council announced this week. The new average rate of 7.06 per cent will come into effect on September 1.

However, the prices paid for a range of some 60 popular generic lines, where price cuts have been heaviest, will be reduced. They will form a new section of the Scottish Drug Tariff to be sent to contractors at the end of this month. A similar move looks likely in England and Wales.

Investigations into the discounts earned by Scottish contractors and the differences between market and Drug Tariff prices for generics were carried out last year. Contractors were shown to earn an average discount of 7.06 per cent.

"The current scale is yielding approximately this average rate, so the great majority of contractors will see little change in their discount recovery," says PGC chairman Graeme Millar.

With contractors able to buy generics at prices considerably below Drug Tariff, the PGC has agreed with the Scottish Home and Health Department that,

rather than discount all ingredients by the extra amount, the prices of a range of popular generics will be reduced to reflect current market levels.

These prices will be shown in a new Part 7L of the Scottish Tariff. They will not be subject to any further discount (Part 7S is nationally negotiated and will not be altered. Those in Part 7L will come from Part 7A).

PGC and SHHD have also agreed to monitor generic prices, and are working on a set of conventions which will allow a rapid response to price fluctuations and changes in wholesaler discounts, leading to changes to the Tariff in months, rather than every four years following an inquiry, as at present.

"I believe the PGC has negotiated a pretty good deal," says Mr Millar. "Contractors will benefit from the discount level

remaining essentially the same and the Department will achieve a more realistic pricing structure for a range of generic products."

The Pharmaceutical Services Negotiating Committee agrees that generic prices in the Drug Tariff should more accurately reflect market prices. Says financial executive Mike Brining: "The increase in discount shown by the 1989 inquiry was substantially due to higher discounts being obtained on generics. In our view that should be received by adjustment of the Drug Tariff not through the discount scale."

PSNC is to reappraise Drug Tariff pricing at its October meeting. "The Department of Health is prepared to enter into active discussions on this issue so we would hope to make progress in time for April 1 next," Mr Brining said.

## PMR warning: 'check claim'

Pharmacists who are claiming payment for the maintenance of patient medication records should ensure they are fulfilling the criteria, says PSNC chairman David Sharpe.

PSNC understands that at least one pharmacist has been found to fall short of 100 records for patients over retirement age or who have difficulty in understanding the nature and dosage of the drugs supplied.

"We know there are routine inspections of claims and we would wish to ensure that contractors are complying with the criteria," Mr Sharpe said.

He added that the Department of Health has written to general managers of FPCs to draw their attention to the matter.

## Lloyd joins PSNC for CCA

Mr Allen Lloyd, chairman and managing director of Lloyds Chemists, has joined the Pharmaceutical Services Negotiating Committee.

He replaces Mike Bridger, who has resigned, as a Company Chemists Association nominee.

The Standing Medical Advisory Committee has issued a report on the cost-effectiveness of opportunistic cholesterol testing, which is being circulated for consultation. The report, which looked at doctors testing people in target groups when they seek medical advice, explains that opportunistic cholesterol testing can make a cost-effective contribution to coronary heart disease prevention in certain circumstances. Comments are invited by October.

## Reservation system to book hospital beds?

The new chairman of the South West Regional Health Authority plans to use his experience of airline reservations to convert NHS waiting lists into an "order book".

Mr Charles Stuart has pledged to donate £5,000 to an NHS activity if, by the time he leaves office, hospitals in the South West are not at least within sight of offering patients firm dates for hospital admission.

Mr Stuart, previously

chairman of Brymon Airways, believes the use of computerised registration systems should benefit patients by providing dates for their treatment up to a year in advance, while helping health service managers plan ahead more effectively.

Hospitals are already "high-tech", says Mr Stuart, so they should not find it too difficult to adopt hotel/airport reservation systems. A working party is looking into the proposals.

## Hospice supply change would be 'voluntary'

Pharmacists who currently supply hospices should consider checking with the medical director that they are doing what is required of them.

This advice has been given by Pharmaceutical Services Negotiating Committee chairman David Sharpe after a joint meeting with the Department of Health and the Royal Pharmaceutical Society over suggestions that such supplies should be made by health authorities.

Mr Sharpe said the Department's view was that any change in the present arrangements of supplies for hospices would be "voluntary".



"Would Mr Smith, travelling to the Infirmary for his hip op, please note departure has been delayed due to road works in the High Street."



## Ohmeda recall reminder

Pharmacists who have made special visits to patients' homes to check Ohmeda Domic 2/4 Regulators after a hazard alert have until July 31 to notify the Department of Health for reimbursement.

A hazard notice was issued after a patient's regulator caught fire, possibly due to an inappropriate scaling agent. The set was identified as one of 73 not returned to Ohmeda in 1988 when Domic 2/4 sets were recalled for modification. These regulators have no letter "S" after the serial number.

Ohmeda have identified another 1050 with a similar sealant which are marked with an "S" — serial numbers 804170 to 804694 and 805000 to 805524. Sets should be returned to Ohmeda for modification.

Contractors who made special visits to check regulators have to inform the Department of Health, Branch FPS2C2, Portland Court, 160 Great Portland Street, London W1N 5TB.

# Discount recovery imposed at 10.41pc, from August 1

A major argument looks set to break out over the imposition by the Department of Health of an average 10.41 per cent discount recovery scale to operate from August 1 for the last eight months of the financial year.

The figure has been calculated to give an overall discount recovery in 1990/91 of 9.67 per cent, given that for the April 1-July 31 period discount has only been recovered at the old — 8.3 per cent average — rate.

Announcing details of the imposed 7.5 per cent package last week after a meeting of the Pharmaceutical Services Negotiating Committee, chairman David Sharpe said that the

Government's action creates a potential problem.

Purchasers of businesses after April 1 will be paying extra discount to make up for benefits — discount recovered at the old rate — enjoyed by the former contractor. "It was asked within the Committee whether this was legal or natural justice," Mr Sharpe said.

Basic prescription fees go up by between 7.8 and 8.1 per cent on similar bands as now. The first 1,400 a month would attract a fee of £1.445 an item (up from £1.34 now), the next 5,250 a fee of 66.5p (61.5p) and the rest a fee of 73.5p (68p). Interim payments to cover the backdating to April 1 will be made in October at the same time as the new discount scale and new fees are introduced. Backpayments will be finalised in January after detailed recalculation.

Discussion of remuneration between PSNC and the Department of Health is now effectively over for the current financial year, regardless of the view of the Pharmacy Review Panel to whom the matter has been referred. The DoH has already given notice that it would use any decision by the PRP only

as background to discussions in future years.

Mr Sharpe said PSNC has revised the wording of its reference to the Pharmacy Review Panel which now asks it "to consider the appropriate level of remuneration for pharmacy contractors in 1990-91 in the light of the Secretary of State's final offer (including the treatment of any underpayment arising in respect of 1989-90) and to make recommendations".

PSNC has removed the reference to the recruitment, retention and motivation criteria the Health Secretary had stated as the basis for remuneration, following an acknowledgement by Mr Clarke of the Committee's concerns, and a commitment for officials to discuss "these and any other criteria that might be appropriate" with PSNC.

Mr Sharpe said this indicated PSNC and the Department are not "in dispute" over such matters. "The Committee has stated a conclusion to this debate on criteria should be reached within a reasonable time-scale," Mr Sharpe said. The DoH has maintained that in its view PSNC had no grounds to refer the matter to the Panel.

## Drug centres in demand?

Many drug information officers see the approach of PACT data and drug budgets as holding tremendous opportunities but are concerned that a considerable rise in the number of GP and community pharmacist inquiries may put a strain on resources.

Dr Jim Smith at the Northern region's drug information centre says that 12.5 per cent of 1989 queries came from GPs and 8 per cent from community pharmacies. The region is planning a campaign to promote the service through information bulletins and direct mailing to GPs.

Jean Blake, regional drug information pharmacist in North West Thames, says GPs currently account for 240 out of 4,000 of their queries, and expects this to rise. She is concerned that any increase will not be matched by additional staff resources. Mrs Blake is not actively advertising the service as she does not feel justified in asking for more work than they already cope with.

David Hands at the Wessex Regional centre admits that a considerable increase in queries could cause some embarrassment. He has applied for additional funding for an extensive advertising campaign to the community sector. "We certainly won't turn away queries," he says, "but without appropriate funding it will be difficult to meet demand." Mr Hands believes the existing technological resources are adequate, but problems may occur with staff resources.

## Doctors defend RDC

The doctors' side of the Rural Dispensing Committee has echoed pharmacists concerns about the proposed abolition of the RDC.

Dr David Farrow, a member of the RDC and chairman of the General Medical Services Committee's rural practices subcommittee, is concerned that the new arrangements to resolve disputes do not result in a deterioration in inter-professional relationships.

Dr Farrow met with Department of Health officials last week hoping to persuade them to reconsider the proposed changes. Although Dr Farrow was unable to reveal the outcome of his meeting, he considered it was little more than a "damage limiting exercise".

Dr Farrow expressed concern that the family health services authorities, which take over the duties of the RDC on September 17, will not initially have the expertise of the RDC. Although the Government says it has no intentions of altering the Clothier arrangements, he said, that seems to mean Clothier with the exception of the RDC.

### Discount scale

Monthly ingredient cost £	Old discount %	New discount %
1-125	2.29	2.83
1001-1125	4.29	5.30
5001-5125	6.46	7.98
10001-10125	7.96	9.83
15001-15250	8.28	10.19
20001-20250	8.43	10.41
30001-30250	8.83	10.91
39751 and over	9.79	12.10

### Part IIIA fees

- "Extemporaneously dispensed" fees go up 5p to 60p, 5p to 110p, and 15p to 225p.
- "Aseptically dispensed" fees go up 65p to 1115p and 40p to 670p
- CD scripts up 5p to 110p
- "Urgent" prescription fees go up 50p to 600p (resident) and 100p

to 1475p (non-resident, both up to 11pm) and 50p to 775p (resident) and 115p to 1775p (non-resident) after 11pm, Sundays and Public Holidays

■ Non-urgent oxygen deliveries go up 111p to 1672p (0-3 miles each way) and 211p to 3182p (over 10 miles each way)

■ Maximum monthly Essential Small Pharmacies Scheme Payment goes up £46.42 to £1,450

■ Pre-registration grant goes up £180 to £2,700

■ Initial residential home visit up £10 to £50. Annual fee for services to home with up to 20 places up £40 to £200, more than 20 places up £65 to £325

■ Patient medication records setting up fee goes up £15 to £165; maintenance fee up £10 to £110

**The Campaign for Health Through Food.** launched officially on July 5, is fighting for the freedom to buy food supplements over the counter, opposing EC moves to classify them as medicines. The public is being urged to write to MPs and MEPs opposing any form of licensing or restriction of sale of vitamins and minerals.

The campaign was initiated by the Institute of Optimum Nutrition and aims to promote the value of healthy eating and maintain the freedom for responsible nutrition consultants to practise. A sponsored Fruit Fast for Freedom is being organised for September 25-29. Further information from 5 Jerdan Place, London SW6 1RE.



## BRIEFS

**Evans Medical** are recalling all pack sizes of lactulose solution following the finding of low levels of a mould in a number of batches through routine testing.

The mould has been identified as a non-pathogenic *Penicillium*, which is not harmful, say Evans. Stocks are being recalled as a precautionary measure and should be returned to wholesalers for credit.

**Boots the Chemist** have won an Access for the Disabled Award at their Swan Centre store in Leatherhead, Surrey.

The award, from the Mole Valley Access Group, was made following the fitting of automatic doors, wider aisles, lower and narrower counters and illuminated signs. In addition, the shop's business has been spread more evenly to reduce noise levels and so benefit the hard of hearing.

A spokeswoman for Boots said the refit is part of a general company policy throughout all stores, to improve facilities for disabled customers.

**The quarterly AIDS figures** released by the Department of Health, show a cumulative total of 3,433 cases reported in the UK by the end of June 1990. This was an increase of 87 on the figures to the end of May.

Some 276 cases were reported in the second quarter of 1990, down 51 on the number of the first quarter. The fluctuation emphasises the need to view the course of the disease over a long period of time rather than base conclusions on short term reports, say the DoH.

**A leaflet warning teenagers** of the dangers of solvent abuse will be available from pharmacies from the beginning of August. It has been produced by Re-Solv, the Society of Prevention of Solvent and Volatile Substance Abuse. The NPA will be advising the public to go into pharmacies to pick up leaflets and "have a quiet word" with the pharmacist. Re-Solv can be reached on 0785 46097 or 817885.

**The Nurofen Pain Relief Project** is awarding annual travel fellowships, worth up to £1,000, to UK health professionals and researchers.

Three grants are on offer to help meet the costs of those invited to present work at meetings and symposia. The awards are open to researchers in the field of pain, not yet holding senior positions and who have not accepted other funding from the pharmaceutical industry to cover travel costs.

Entry forms from: Nurofen Pain Relief Project (TF), 4/5 Cloisters House, 8 Battersea Park Rd, London SW8 4BG.

## Branded generics: NPA would support test case

A pharmacist being forced by GPs to stock one particular brand of generics has elicited an angry response from the National Pharmaceutical Association.

The pharmacist was informed that from a given date the dispensing doctors would be prescribing only Ashbourne Pharmaceutical branded generics.

NPA director Tim Astill is annoyed because the doctors will be getting a discount from the company, but the pharmacist will lose money on current stock, and will have to spend money on buying in the "brand" without the same discount.

Ashbourne's sales and marketing director Maureen Ross told *C&D* that they are essentially a dispensing doctor service, so the discounts offered to them are necessarily greater than those offered to pharmacists.

"We don't get involved with the retail trade except when it overlaps with a dispensing doctor service. But if chemists dispense our brands they would not suffer compared to any other brands," she said.

Tim Astill, however, said: "It is manifestly wrong for companies to offer widely different prices to pharmacists and doctors. The only reason can be to influence their prescribing and this clearly contravenes the ABPI code of conduct."

Although the pharmacist is yet to decide what to do, Mr Astill told *C&D* that the NPA would be happy to support their members if they chose to ignore the GPs' prescriptions and carried on dispensing the "high quality"

generics that they supply at present. By doing so they would be inviting a complaint to their family practitioner committee's service committee, effectively giving rise to a test case.

In all this, the benefit to the patient must be the paramount concern, Mr Astill cautioned.

■ The secretary of the Pharmaceutical Services Negotiating Committee Steve Axon has warned that pharmacists must not supply generics when a brand is prescribed. This would contravene the terms of their NHS contract, he said.

However, Mr Axon told *C&D* that PSNC does not approve of companies like Ashbourne who simply source generics and repackage them as branded products. "Neither the pharmacist nor the doctor has any idea who has manufactured the product," he said.

PSNC also disapproves of Ashbourne targeting dispensing doctors offering a 30 per cent bonus. Pharmacists may also get some discount but it was the Department of Health who would be picking up the bill for the full price, said Mr Axon.

"This is not the most cost-effective way of prescribing, but it is very profitable for dispensing doctors," said Mr Axon.

"It is a ludicrous situation, and rather sad that doctors are being suckered into this. Some may enter into it innocently. But many do not, and the profits go to them, not the National Health Service."

Mr Axon called on the DoH to "get to grips" with branded generics before 1992.

## NPA to start 'mind' testing job seekers

The National Pharmaceutical Association is launching a new service in the Autumn that it expects will take some of the luck out of engaging new staff. It is also planning to canvass members at the end of this month for their opinions on payroll and environmental pollution sample services.

The psychological job seeker test service is being offered because it is difficult for pharmacists to know whether the person they are engaging is right for the job, says NPA business services manager John Goulding.

The applicant will have to complete a questionnaire with 80 questions, simply answering "yes" or "no". The results are transferred to a grid and phoned through to a company who will supply a psychological profile of the applicant.

"Many major companies are already using this scheme or others to aid the selection process," said Mr Goulding. It has built in to it a means of foiling "false" answers, he added.

The payroll service would either be done in-house or by outside specialists, Mr Goulding said. Pharmacists had often inquired whether such a service was available; the postal survey would determine whether they would be prepared to pay for it.

The environmental pollution service would involve pharmacists accepting samples from their customers and sending them off to be analysed. Samples would include tap water, soil, plants and possibly body fluids, said Mr Goulding. If pharmacists respond favourably, a pilot scheme may be set up, said Mr Goulding.

## Home test

Personal measurement of blood cholesterol levels will now become as straightforward as pregnancy testing, say John Bell & Croyden who have just introduced a new home test kit.

They are the exclusive distributor of Chemcard, a pocket-sized cholesterol test card with full instructions, diagnostic notes, safety lancet, alcohol swab and plaster (£6.99).

The level is obtained in three minutes by visual comparison with a colour wheel surrounding a reactive pad, from a finger prick of blood. John Bell & Croyden. Tel: 071-935 5555.



*The Mayors of Enfield and Haringey made sure the local DUMP campaign got off to a good start by handing over their unwanted medicines at Simmons Chemist in Barnet, Herts. Pictured at the start of the campaign are (from left) Councillor Mary Neuner, Mayor of Haringey, Mrs Margaret Bains, member of Enfield and Haringey FPC, Mr Fred Neuner, Mrs Neta Patel and Mr N Patel, Simmons pharmacy, Mr Laurence Bains, Chairman of Haringey Health Authority, Councillor John Jackson JP, Mayor of Enfield and Mr David Kleeman, Chairman of the FPC*



## Ruling called for on ads in GP leaflets

National Pharmaceutical Association director Tim Astill says he is hoping for an early pronouncement from the Society's Ethical Committee on pharmacists advertising in GP practice leaflets.

Now GPs are required to produce these leaflets, they are seeking advertising to finance them and are approaching pharmacists, says Mr Astill.

He feels this is "probably OK", providing all pharmacists in the GP's catchment area are given the opportunity to advertise. But since the decision is the doctor's, it is difficult to insist on this, Mr Astill explains.

With no precedent to follow, a pattern will eventually emerge, predicts Mr Astill. But he foresees two possible dangers. Firstly that doctors may offer exclusivity to one pharmacist. This would be wrong since it would give one pharmacist a professional advantage over the others in the area.

The second possibility is that a pharmacist might make a secret payment to the doctor for such exclusivity, says Mr Astill. In the present situation no one has any control over these, he warns.

NPA members report charges in the region of £200 to £300, and in one case £400 plus a commitment to advertise for three years, Mr Astill told *C&D*.

## Relocation madness?

An appeal against the decision of Warwickshire FPC which allowed a Kenilworth pharmacy to move next door to an existing one has been dismissed.

Lloyds Chemists, originally situated in the centre of Kenilworth, applied to relocate their premises 150 yards to Station Road, opposite a six doctor practice. The move was permitted despite the new premises being next door to those of Mr Dudley Taylor. The former Lloyds site is now a drug store.

Mr Taylor says he is staggered by what he sees as "a blatant case of leapfrogging."

A spokesman for Warwickshire FPC said: "The move was considered to be a minor relocation and as such it was not necessary to consider that the position of existing pharmacies."

# TOPICAL REFLECTIONS

by Xrayser

## Hope springs eternal...

The Medicine Control Agency has asked for comments on the proposal to reclassify Nicorette 2mg and Buscopan as Pharmacy medicines. I will answer unequivocally: both of these will make welcome additions to my OTC armoury. Many smokers have been deterred from using Nicorette by the requirement for a doctor's prescription. As a P medicine with proper counselling, much wider use could be made of this proven product in the fight against smoking.

Official progress is always slow but hope is increasing that at last deregulation of more POM drugs is on its way. Maybe I will be still practising when vaginal antifungals, chloramphenicol eye preparations, Zovirax cream, topical nonsteroidal anti-inflammatories, triamcinolone dental paste etc, etc, are also available for pharmacist recommendation.

## In distress

Hiccups is a very distressing condition, not helped by the amusement it generates in most onlookers. Many folk remedies involve some form of shock therapy but, occasionally patients come into my pharmacy suffering from a chronic attack, which is no longer amusing.

Many years ago, one of the "old fashioned" gentleman reps advised me to use a dimethicone antacid and despite my scepticism it worked! Ever since I have produced my white mixture as a magic draught and even though the blacklist caused a hiccup when the original formulation was discontinued, I have found similar products work just as well. The BNF denies the effectiveness of dimethicone for flatulence: maybe its use in intractable hiccups should be investigated instead?



## Political expediency

Sir George Young refuses to go away, and if rumour is correct canny Ken has seen the opportunity to placate the medics by tantalising them with the possibility of future universal doctor dispensing. This political ploy does not address the true consequences of the suggestion. Pharmacy isn't only a supply service, as exemplified by the blind and deaf patient with whom I

spent 20 minutes explaining how and when to use his asthmatic inhalers.

With the introduction of computer technology both medicine and pharmacy are dramatically changing their methods of practice. A reappraisal of their primary functions, educational requirements and mode of practice is paramount, but the straightjacket of NHS contracts precludes natural evolution and change under political duress is fraught with expedient self-interest.

The time for a collective Nuffield has arrived but does the courage to face the problems of the future, across the professional divide, exist within either profession?

## Another expense

Plastic is inexorably increasing its hold over my tills. Prescription tax is now no longer petty cash and increasingly I am being offered credit cards for prescription charges. I have always been amazed that the retailer has to pay the credit card company commission for the privilege of offering the customer credit, but when that payment involves a tax that I am instructed, unpaid, to collect, salt is rubbed into an already festering wound. At the moment the problem is irritating but the convenience of plastic will soon make it unreasonably painful. Another little expense to be paid out of our annual 7.5 per cent bounty?



# COUNTERPOINTS

## Benylin loses a spoonful of sugar

Warner-Lambert have added sugar-free Benylin for children to their cough medicine range.

The new formulation (125ml £1.89) will be sold alongside the existing children's product. Artificial colourings have also been removed, but other ingredients and the dose are unchanged. The pack design is based on the Benylin flag branding and coloured green.



An advertising campaign for Benylin sugar-free is planned from the beginning of the 1990/91 season and the range will be supported on television with the "Snowman" commercial. Warner-Lambert Health Care. Tel: 0703 620500.

## Healthcrafts Summer offer

Booker are offering 20 per cent extra free on Healthcraft's PRN Mega-Multi multivitamin and mineral combination.

Available from August, the extra free offer aims to encourage trial and stimulate repeat purchase. PRN Mega-Multi's are part of the Healthcrafts prolonged release nutrition range. Booker Nutritional Products. Tel: 0932 336336.

## Rimmel focus on the independent

Rimmel International are putting the focus on the independent chemist this year, with the launch of their "total quality" approach to the sector, which they believe will help increase their market share and raise their profile.

Sales planning co-ordinator Claire Ferguson has been working on the project along with South-West regional manager Sue Upshall. She believes the project represents an entire change in management philosophy and will improve the level of service to the independent sector.

At a meeting in Ashford in June, personnel from departments throughout the company were given the opportunity to raise ideas and concerns about the company's trading approach to pharmacists. "As a result we were able to put together detailed action plans," says Ms Ferguson.

This month sees the beginning of a gradual implementation of ideas and strategies which will include: a redesign of the Rimmel display stand and title strips to improve legibility and make merchandising and selection easier; the issue of a customer care letter to pharmacies to improve communication and define the customer service role; the introduction of a prepaid returns label designed to simplify the returns procedure, and a new

stockist display pack.

The company has also produced open/close door signs and will re-emphasise its non-animal testing policy.

As part of their short term package, Rimmel have also come up with competitions for the sector including £500 worth of Thomas Cook vouchers for the best Accent on Bronze window display. There are also corporate identity gifts for the pharmacist, including a Rimmel desk diary. Other competitions are planned for the future.

According to Dr Bill Dupuy, director, total quality, the entire project is based on prevention rather than detection. "The idea is to prevent problems occurring in the first place rather than having to sort them out afterwards."

He believes that as a direct result of the "total quality" approach, Rimmel will raise its profile in the independent sector. Communications will improve — along with customer care and support, he says. Next month, the company will be sending out a customer expectation study which will be the independent's first opportunity to take part in the TQ programme. In November, long term ideas and strategies will be introduced. The project will be reviewed in December. Rimmel International Ltd. Tel: 071-637 1621.

## Robinson plasters repackaged

Fast Aid adhesive dressings have been repackaged and are now available in thermoformed packaging, which will improve their storage conditions, according to Robinson.

The white, moisture-proof containers have hinged lids with reseal clip fasteners, and are stackable. They do not have the fibre particle problems associated with the original paperboard match-box style pack, say Robinson Healthcare. Tel: 0246 220022.

## Whitehall test Anadin ibuprofen

Whitehall Laboratories are test marketing Anadin ibuprofen in the Yorkshire area.

Each white, sugar coated tablet contains 200mg ibuprofen and the dose is two tablets initially followed by one to two every four hours if necessary, up to a maximum of six in 24 hours, for the treatment of aches and pains.

The Pharmacy only product (PL 5544/0010) comes in three sizes: 10 (£0.89); 20 (£1.69) and 40 (£3.19). The 10s and 20s come in trade outers of 24 (£13.98 and £26.56, respectively) and the 40s in an outer of six (£12.53).

Whitehall say this latest addition combines the efficacy of ibuprofen with the strength of the Anadin name. The launch will be backed by a television campaign with a national equivalent spend of £2.5m. Further awareness will be generated through activity in local newspapers, say Whitehall.

A range of merchandising material together with technical support data and assistant training booklets is available. Whitehall Laboratories Ltd. Tel: 071-636 8080.





# We're the first to put the freeze on CFCs

STOCK  
AVAILABLE  
FROM  
23rd JULY

**N**ew, reformulated Ralgex freeze spray is now 100% free of harmful CFCs making it the only non CFC freeze spray on the market.

Ralgex freeze spray is also the only one to contain a topical analgesic for genuine, longer lasting pain relief; these qualities help to make Ralgex as fast acting and effective as ever in the treatment of muscular pain and sports injuries.



The new packaging communicates the CFC free message that will surely make Ralgex freeze spray the No. 1. choice for your customers – Recommend it to them by name!

Order Ralgex in preference to any other freeze spray.

It's the natural decision.



**SmithKline Beecham**  
Health No.1 IN  
Care OTC MEDICINES



## Flex Fortifyl for hair from Revlon

Revlon are launching Flex Fortifyl Complex, a salon quality hair conditioner available in two formulas — one for dry, damaged hair and one for fine, limp, weak hair.

An intensive leave-in treatment, Flex Fortifyl Complex penetrates deep within the hair cortex, say Revlon and requires no extra effort.



Flex Fortifyl Complex 99 is the formula for dry, damaged hair, and helps to mend and prevent split ends and to counter damage from colour processing, thermal styling products, and chemical treatments, claims the company. Flex Fortifyl Complex 88 is for fine, weak hair. The clean conditioning formula contains no oil or wax to weigh hair down.

Both products are packaged in professional style plastic ampoules, clearly marked to dispense five individual hair treatments.

The treatments condition to the standard expected from a salon treatment at a significant price advantage, say Revlon. Each 10ml is equivalent to one salon conditioning treatment.

Flex Fortifyl Complex formulas retail at £4.95 each and will be available from September. Revlon International. Tel: 081-568 4466.

## Chalkgate

Chalkgate have launched a range of hair products based on the juice of the Alpine birch tree. The Birkenblue hair lotion (260ml, £9.95) and oil (100ml, £4.95) are suitable for all hair types. The hair cream (30g, £8.95), is designed to be massaged into the scalp. In addition, Jobra hair tonic (260ml, £4.99) is being launched as an antidandruff lotion, say Chalkgate Ltd. Tel: 071-722 5221.



## S&N make Ecosense for the environment

Smith & Nephew are claiming a first for their environmentally friendly press-on towel, Ecosense.

It is said to be 97 per cent biodegradable; the rest consists of the adhesive strip along the back, and S&N say they are researching ways of reducing even this 3 per cent. Additionally, over 50 per cent of the towel is made from recycled materials. If it were 100 per cent recycled, there might be a trade-off in absorbency and cleanliness, say S&N.

Ecosense consists of two layers of pulp with a central layer of wadding, surrounded by fleece, a combination said to afford absorbency without the use of a plastic backing or additional bulk. The lack of plastic backing also allows the product to breathe, so it is more "naturally" hygienic, say S&N.

The packaging is made from recycled plastic, said to require less energy and produce fewer pollutants during manufacture than paper packaging. S&N say they are researching biodegradable alternatives.

Ecosense comes in regular absorbency (16 £1.09); the company has no plans at present to launch other sizes or absorbencies. Ecosense is said to respond to consumers' demands for a more ecologically sound product which provides the primary requirements of absorbency, reliability and discretion.

S&N are supporting the launch with sampling and public relations activity targeted at national and consumer Press, which will continue throughout the year. Smith & Nephew Consumer Products Ltd. Tel: 021-327 4750.

## Vantage hairspray

An ozone friendly styling hair spray with conditioner is the latest Vantage own label line from AAH.

Available in both normal and firm hold, the hairspray is formulated to hold hairstyles in place while also providing a conditioner for all hair types.

Sold in trade outlets of 12, Vantage styling hair spray with conditioner has a trade price of £6.12 (normal hold and firm hold). The rsp for both variants is £0.79 giving a profit on return of 25.76 per cent. AAH Pharmaceuticals Ltd. Tel: 0928 717070.

Daniel Galvin is launching his haircare range in 393 selected Boots outlets in September. The launch will be supported by a £200,000 advertising campaign in major women's magazines. The range consists of shampoo, three conditioning treatments, a hairspray and a mousse. Daniel Galvin. Tel: 071-486 9661.

Zenner are offering pharmacists an introductory price of £100 off the cost of either of their two hair accessory stands. The two stands, one a wall stand and the other a spinner, both contain a comprehensive range of fashion hair accessories and functional items such as combs and curlers. Zenner (UK) Ltd. Tel: 081-979 2155.

## Nutrient hair conditioner from Larkhall

Cantassium nutrient hair conditioner is the latest natural beauty product from Larkhall.

Complementing their existing range of herbal hair care products, the conditioner is said to add strength, body and shine to all hair types: the formulation is rich in biotin, pantothenol and other herbs known to be beneficial to health hair, claim Larkhall.

Cantassium nutrient hair conditioner (120ml £5.95) is not tested on animals. Larkhall Natural Health. Tel: 081-8741130.

## Three more for Cutex

Rimmel have introduced three new variants into their Cutex range of nail polish removers.

Vaseline intensive care nail polish remover comes with Vaseline intensive care lotion to condition nails and cuticles; remover with proteins and vitamin B5 is said to help nail flexibility, and acetone free remover has added moisturisers, lanolin and castor sugar for condition.

Each variant is lightly fragranced and distinguished by colour coded bottles and caps.

Rimmel have produced an introductory parcel with a retail value of £41.40 for the launch period only, comprising: six 100ml bottles and six 200ml bottles of each variant along with POS material and details of a consumer competition. Rimmel International Ltd. Tel: 071-637 1621.

## Libra extra- fill promotion

During August and September, Scott are introducing an extra-fill promotion across their Libra Pursepack and Libra Pantyliners ranges.

The promotion will offer consumers free products in special packs. The regular and super Libra Pursepacks will include two free towels and the Libra Pantyliners five free liners.

Libra Pursepacks claim to be market leader in the trifold towel sector with a sector share of 36 per cent (Nielsen). Scott Ltd. Tel: 0342 327191.



# The Natural Leader in Herbal Baby Drinks.

## No. 1 Brand in Herbal Baby Drinks.

The market for herbal baby drinks is growing rapidly. As the established manufacturer in this field, Milupa are No. 1 in the market and the No. 1 Baby Drink brand overall in chemists when sales are converted into made up 100ml servings.\*

## Respected and Trusted.

It's a position we've attained because both mothers and babies alike have come to trust and love Milupa's Herbal Baby Drinks. Health Visitor recommendation in particular has increased demand for the range.

## A Natural Success.

There is Fennel, Camomile, Herbal Blend and Hibiscus & Rosehip. Soothing and thirst quenching, Milupa Herbal Baby Drinks contain only natural ingredients. They are simply a blend of dextrose (glucose) and natural herbal extracts. They contain no artificial colourings, flavourings or preservatives. What is more, they are lower in sugar than most other baby drinks.

## Economical to Use.

Milupa Herbal Baby Drinks are conveniently packaged in stay-fresh resealable 200g and 90g tubs. Granulated for easy mixing and to enable mums to mix as little or as much as baby needs, they are very economical too.

## Healthy Sales in Chemists.

As a result of consumer loyalty and rapid growth, Milupa sales now account for almost one quarter of all baby drinks sales in the chemist\*. And with constant advertising, sampling and promotions our sales can only increase. So make sure you stock Milupa Herbal Baby Drinks, the natural way to watch your sales grow.

# **milupa**®

Milupa Herbal Baby Drinks.  
The natural answer for  
thirsty little experts.



See your Milupa representative or ring Milupa Sales Department on 081-573 9966.

Milupa Ltd., Milupa House, Uxbridge Road, Hillingdon, Middlesex, UB10 0NE.



## Taba.gum — smoke without fire

A chewing gum that is said to give smokers the aroma of tobacco without nicotine, is being launched by Pierre Fabre next month.

Taba.gum is free of sugar and enriched with vitamin C to help prevent the deficiency which often occurs in smokers, says the company. Chewing the gum releases the tobacco aroma which reduces craving for cigarettes.

The gum in two flavours mild tobacco and mild tobacco with menthol, comes in 20s (around £1.65) in a pack designed to look like a miniature cigarette pack. *Pierre Fabre Ltd. Tel: 0865 742525.*



## Gyrodon now in UK

W.T. Marketing are the sole distributors of Gyrodon, a toothbrush manufactured by French company Laboratories Delta.

The brush, which has a round rotating head, rounded bristles and a thin handle with thumb rest, was designed by a professor at Strasbourg University to meet dental recommendations, claim the company.

Gyrodon is said to be particularly suitable for people with gum disease or sensitive gums, for people who wear braces and for children. *W.T. Marketing (UK) Ltd. Tel: 0371 875698.*

**AAH Home Health:** Four strengths of therapeutic putty have been added to AAH Pharmaceuticals' Home Health catalogue. Available in two sizes, the putty is colour coded for strength identification and can be used for finger and hand exercises. *AAH Pharmaceuticals Ltd. Tel: 0928 717070.*



## Wisdom add snowman to cast of characters

Wisdom are extending their range of children's character toothbrushes by introducing the Snowman range, aimed particularly at the Christmas market.

The Snowman brushes come in three pastel shades, pink, blue and white, retailing at £1.19. A three dozen display pack with backing board is available on request, say Wisdom, who believe the range makes attractive stocking fillers.

To complement their range of Flintstones toothbrushes for children, Wisdom have introduced Flintstones toothpaste in a pump dispenser.

The paste, which contains fluoride, has a mild mint flavour and a window to indicate the amount of toothpaste left in the dispenser. Flintstones toothpaste (£1.29) will be available in bright, highly visual packaging, similar to that of the toothpaste, say *Addis Ltd. Tel: 0992 584221.*

### ON TV NEXT WEEK

GTV Grampian	U Ulster	SK Sky
B Border	G Granada	STV Scotland (central)
C Central	A Anglia	Y Yorkshire
CTV Channel Islands	TSW South West	HTV Wales & West
LWT London Weekend	TTV Thames Television	TVS South
C4 Channel 4	TV-am Breakfast Television	TT Tyne Tees

<b>Alberto Pure &amp; Clear:</b>	All areas
<b>Bodyplan:</b>	TV-am
<b>Dettol Liquid:</b>	All areas inc Sky except CTV, LWT, C4
<b>Diocalm:</b>	All areas
<b>Finale:</b>	Y, C, A, TSW, TVS, LWT & TTV
<b>Gillette Sensor:</b>	All areas
<b>Impulse:</b>	All areas + Sky
<b>Just for Men:</b>	All areas except CTV, TT & TV-am
<b>Libra Bodyform:</b>	All areas except CTV, LWT & TTV, TV-am
<b>Loving Care:</b>	Y, C, A, HTV, TSW, TVS
<b>Macleans toothpaste:</b>	All areas
<b>Mum deodorant:</b>	All areas
<b>Philishave Tracer:</b>	ITV, C4
<b>Sensodyne toothpaste:</b>	All areas except CTV & TV-am
<b>Silvikrin:</b>	All areas
<b>Sure:</b>	All areas
<b>Timotei Dandruff shampoo:</b>	All areas inc Sky except TV-am

## Nina Ricci go for dry oil

The new L'Air du Temps dry spray oil is a highly perfumed conditioner for the body, leaving a soft sheen on the skin with no greasy residue.

As the warmth of the perfume, with its floral hints, musk and spices develops, jojoba and wheatgerm oils soften and condition the skin, say Nina Ricci, adding that the oil is perfect for layering the L'Air du Temps fragrance.

The product comes in a white aluminium canister, featuring the golden doves synonymous with L'Air du Temps, and is packaged in a yellow and gold carton. The dry spray oil will be available from October priced £20. *Nina Ricci (UK) Ltd. Tel: 071-493 8232.*

## Memories from Revlon

Colour memory eyeshadow is the latest product from Revlon. The shadow features the new "micro-chrome" system which is said to make colour application easy.

Colour memory is said to be long-wearing and is fragrance and irritant free. It comes in ten shades (£7.95) and is presented in a mirrored compact in black and gold with a sponge-tipped applicator.

Meanwhile, the company has announced its theme for Autumn — desert spice. The look is soft and rich with natural earth tones for definition and warmth.

Eyes are in portwine, rosewater, sandbar, beige and coffee, while lips and nails match in reds, roses, dusty pinks and reddish browns. The range will be available from September. *Revlon International Ltd. Tel: 071-629 7400.*

**Stafford-Miller** are launching their "biggest ever" national television advertising campaign for Sensodyne Search toothbrushes timed to cover the peak sales period of July/August. The advertising positions Search as the "ultimate toothbrush", and shows the metamorphosis from the basic toothbrush shape, say *Stafford-Miller Ltd. Tel: 0707 331001.*

**Galen** have produced new stickers for boxes of their OTC Galpseud tablets. The brightly coloured sticker depicts some of the typical symptoms of patients with nasal congestion throughout the Summer, say *Galen Ltd. Tel: 0762 334974.*



## Ames old Minilab is remodelled

The new Minilab cholesterol screening system (C&D, Feb 17) is now available.

Extra features of the Minilab include a cuvette-well safety design to minimise user error, and a new specimen preparation method for easier sample handling.

The new model (£525), which Ames say has been tested successfully in hospitals and in a community pharmacy, is now on offer as a package with a Stat-spin small bench top centrifuge (£450), and a Abso-stat 10mcl pipette (£30). A reagent kit for 40 tests is also available (£27.50).

A project to familiarise pharmacists with the Minilab is planned for September, in conjunction with the National Pharmaceutical Association.

The new Minilab can also be obtained from the NPA's business services department, say Ames Company Division of Miles Laboratories Ltd. Tel: 0753 645151.

## Extra body from Wella Balsam



Wella have added an extra body variant to the Wella Balsam range in response to the fact that 34 per cent of women have fine or flyaway hair.

Formulated to give fine hair increased body and volume without overloading, the new Wella Balsam extra body shampoo

and conditioner contain an ingredient which has been derived from young plants, and is said to penetrate fine hair to help strengthen its structure from within.

Extra body conditioner also contains natural moisturising agents to improve the hair's condition and give shine without heaviness, say Wella. Both products are enhanced with extract of bamboo.

The extra body variant comes in 250ml pearlescent cream bottles, and is colour coded pink. To encourage consumer sampling during the launch period, 50ml trial sizes of both shampoo and conditioner will be available at £0.29.

A £300,000 national press advertising campaign for the new variant commences in September in leading women's magazines such as *Cosmopolitan*, *New Woman*, *Elle*, *Marie Claire*, *Essentials*, *Prima* and *Company*. Wella Balsam (GB) Ltd. Tel: 0256 20202.

## Braun update beard trimmer

Braun are launching an improved version of their Exact universal beard trimmer (£34.95). The comb on the new trimmer has five height settings making it capable of a closer, "designer stubble" shave, says the company.

The Exact "5" is both mains operated and re-chargeable with an integrated re-charger, and adapts automatically to any voltage between 100-240v AV say Braun.

The five height settings of the distancing comb are 2.5mm, 6mm, 13mm and 16.5mm which Braun say gives a greater versatility of cutting heights. A combination switch controls the on/off and the distancing comb allowing the height setting to be changed while the trimmer is in use.

The Exact "5" comes complete with its own travelling pouch and cleaning brush, which makes it ideal for holiday use, say Braun (UK) Ltd. Tel: 0932 785611.



Look no further  
for the relief of conjunctivitis  
due to hay fever

# OTRIVINE®-ANTISTIN®

xylometazoline hydrochloride, antazoline sulphate

Sterile eye drops

A Pharmacy Sale only product



Zyma (UK) Limited, Alderley Edge, Cheshire SK9 7XP Detailed information will be sent on request



# SUMMER

selections

Fashion fabrics and finishes in satin, raffia, jute and grossgrain.



Lady Jayne

Laughton & Sons  
Warstock Road, Birmingham.  
Tel: 021-474 5201

## COUNTERPOINTS

### Nivea gets together with H. Samuel

Smith & Nephew's Nivea brand is joining forces with high street jewellers H. Samuel as part of the relaunch activity for the brand's pearl anniversary.

A promotion, running for three weeks from July 21, will entitle all H. Samuel customers purchasing a pair of gold earrings costing £9.99 or over, to receive a free 125ml bottle of the Nivea lotion of their choice, plus a copy of the

Nivea "Pearls of Skincare Wisdom" booklet.

Smith & Nephew say they are investing a total of £5 million to promote the Nivea brand during 1990, including a £1.3m heavyweight TV campaign to support Nivea lotions, the heart of the Nivea brand, which will run from August. *Smith & Nephew Consumer Products Ltd.* Tel: 021-372 4750.

### Three-pack Designers

Griptight have introduced a three-pack of Designer Collection bottles.

The 250ml bottles come in design combinations of Jumbo elephant, Edward bear, yellow duck, and cat — in a box with a window which leaves the designs visible. At £4.25, this represents a saving to the customer of around £0.52, say *Lewis Woolf Griptight Ltd.* Tel: 021-414 1122.

The latest addition to the Plenitude range is a pure foaming wash (£2.99) — a water activated, soap-free cleansing gel. The wash is said to be 100 per cent soap free and is suitable for both oily or combination skins due to its oil-free formulation. It has been dermatologically tested. *L'Oreal.* Tel: 071-937 5454.

### Schering repack Cushion Grip

Schering-Plough's dental fixative Cushion Grip now sports a new look with a blue "Cushion" logo.

New look Cushion Grip is presented in a merchandiser holding a dozen packs and flashed: "Holds dentures snugly in place for up to a week". *Schering-Plough Ltd.* Tel: 0638 716321.

**Douglas Bridge Associates** are running a nationwide advertising campaign for Permasoft and Toofy Pegs, both recently acquired from Dental Projects. Some £500,000 is being spent on advertising in daily and Sunday newspapers, and a PR campaign is planned. *Douglas Bridge Associates Ltd.* Tel: 0403 784781.

## PRESCRIPTION SPECIALITIES

### Blackcurrant Rehidrat

Searle (UK) have launched a blackcurrant flavour Rehidrat oral rehydration solution to complement the existing flavours of orange and lemon and lime.

Cartons contain 24 sachets (£5.85 trade) each with a sodium concentration of 50mmol/l. *Searle Pharmaceuticals.* Tel: 0494 21124.

## BRIEFS

**Reckitt & Colman** are now supplying Infant Gaviscon in dual sachets with one dose each rather than two-dose singles. This allows accurate dosing of children under 4.5kg bodyweight, for whom the recommended dose was half a sachet (one dose). This is equivalent to one part of the new dual sachet. Pack size and price remain unchanged. *Reckitt & Colman Pharmaceuticals.* Tel: 0482 26151.

**Nivaquine** 200mg now comes in a 30 tablet original dispensing pack (£1.115 trade) which replaces the 100-tablet presentation. *May & Baker Pharmaceuticals, division*

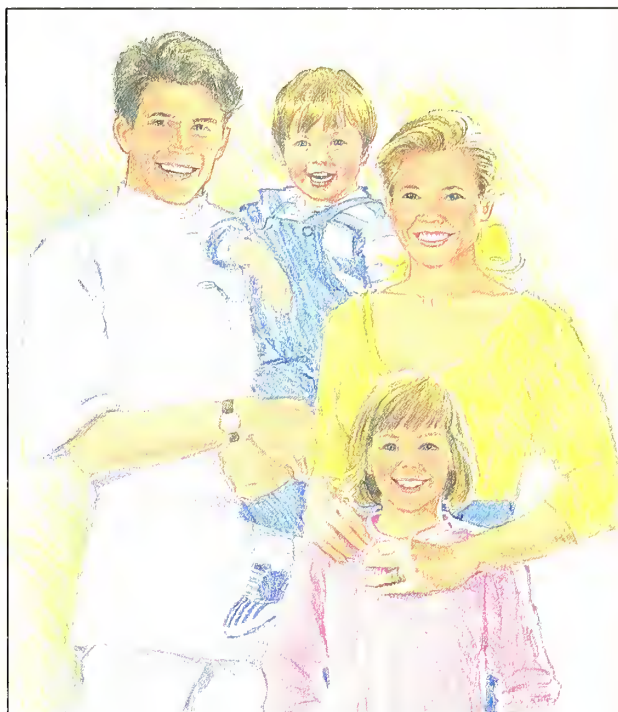
*of Rhône-Poulenc Ltd.* Tel: 081-592 3060.

**Quinoderm's** Hydromol emollient is now available in a one litre size (£6.74 trade), complementing the 150ml and 350ml bottles. *Quinoderm Ltd.* Tel: 061-624 9307.

**Farillon** have been appointed distributors for Rowachol and Rowatinex capsules by, Monmouth Pharmaceuticals Ltd. *Farillon Ltd.* Tel: 04023 71136.

**Norwich Eaton** have introduced an OPD of Macrodantin 50mg capsules (28 £3.05 trade). *Norwich Eaton Ltd.* Tel: 091 222 1882.





# Colgate, the No.1 with British dentists' families

The No.1 toothpaste brand both in the UK  
and throughout the world – Colgate is also the  
professional choice of British dentists for  
their families.

Be sure you make it your choice too.

## Colgate

*The World's No.1 Toothpaste*





**HE'S PLEASED IT'S SOY**

**WE'RE PLEASED IT'S NOW  
IN NEW-LOOK PACKS**

Cow's milk intolerance is no fun, whichever way you look at it.

So, as infant formula specialists, we're dedicated to making sure Wysoy\* provides the quality solution.

Now we're pleased to announce the latest result of our commitment - the new-look Wysoy packs. These have been designed to bring greater reassurance to your customers. Their new easy-to-follow graphics and instructions explain more clearly than ever what Wysoy is for and how to make up feeds.

So now your customers can make a well-informed choice every time.







**NEW  
PACK DESIGNS**

**SHE'S PLEASED IT'S WYETH**

Wysoy has been the most widely prescribed and recommended soy formula since its introduction ten years ago. It now accounts for two out of every three scripts in its soy sector. And every one brings potential new business to the pharmacy and the baby fixture.

So why change the packs?

Our research shows that mothers trust Wysoy's long record of quality and safety. Mothers also say they feel reassured to know that Wysoy comes from Wyeth Nutrition. So, the new packs reflect clearly that Wysoy is part of the SMA family.

One thing which stays unchanged of course is Wysoy's tried and trusted formula. Now, with its vegetable fat blend, we're pleased to say that Wysoy is the complete solution to cow's milk intolerance for even more of your customers.

**IMPORTANT NOTICE**

Breastmilk is best for babies. Wysoy milk-free formula is intended to meet the nutritional needs of infants and children who are allergic to cow's milk protein or intolerant to lactose. Professional advice should be followed.

**Wysoy**

- The No.1 Soy Formula.



# Growing faith in pharmacists?

**Attitudes of the public, GPs and pharmacists themselves will influence how the pharmacist's role develops through the 1990s. Taylor Nelson Medical outline their latest research into how these attitudes — and attitudes to healthcare in general — are changing.**

In the 1950s health was perceived primarily in the negative sense. It was the absence of illness. Illness was something you had to cure usually by action of some third party or authority figure such as a doctor.

The movement of the 1970s, particularly in the USA, was to treat the body as a machine which needed to be exercised to achieve its potential. This contributed to mental equilibrium — a healthy mind and body.

We now see movement to self knowledge and personal responsibility using all of one's senses and exploring mental frontiers. People are more aware of positive vitality, energy and drive in achieving fulfilment in life. The idea that an individual's vitality has a given quantum which can be increased, husbanded, and effectively used is an important social trend. And so we find a growing holistic approach.

## Desire for autonomy

The trend setters of today have a desire to control their lives, or at least to "pilot" their lives in a way which enables them to cope with complexity and uncertainty.

This desire for personal autonomy and control is manifested in the large increase in people who claim they wish to take special measures to keep fit and healthy — from 57 per cent in 1986 to 73 per cent in 1989.

Fewer people feel there is little they can do to prevent disease. There are far fewer now, compared with 1986, who think they rely too much on doctors. These are people who take active responsibility for their own health.

Many people are turning to non-medical practitioners such as pharmacists for help. In controlling one's health one also wishes to express choice, and this has led to a growing belief in OTC medicines and self-medication.

Research has shown that the general public has increasing confidence in the pharmacist and non-prescription medicines. The proportion of the population agreeing with the statement "For most minor illnesses a chemist can give as good advice as a doctor" has grown significantly since 1986 from 66 per cent to 76 per cent in 1989. Among women the percentage agreeing is 84 per cent compared with 70 per cent amongst men, which is in line with the tendency for women to be more likely to buy non-prescription medicines than men.

However, whereas in 1986 this percentage was also higher among 25 to 44 year olds, no such differences now emerge — all age groups agree that pharmacists can advise about minor ailments.

Only 11 per cent agreed with the statement "I think that medicines you can buy yourself are no good at all". The highest level of agreement was found among the over 65 year olds (17 per cent agree with the statement). This group is exempt from prescription charges and is perhaps less exposed to non-prescription medicines, none the less the elderly are less sceptical than they were in 1986 (24 per cent).

Doctors support self-medication for minor

illnesses; 82 per cent of them agree that a pharmacist can give as good advice as a doctor for minor illnesses, a figure similar to that recorded in 1986 — 78 per cent. Fewer doctors have doubts about the abilities of pharmacists than members of the general public. While doctor attitudes have remained fairly consistent on this point, over time we would hypothesise that public acceptance of the pharmacist in this capacity will continue to grow in line with that of doctors.

Despite increased claims that a pharmacist is as good as a doctor for minor ailments there has been little increase in the proportion of the population willing to seek advice. This is even the case for minor symptoms such as flu (16 per cent vs 14 per cent in 1986) and stomach complaints (19 per cent vs 14 per cent).

People are just as, or more likely, to select self-medication products for these symptoms themselves. Most choose to do this from a pharmacy rather than a drugstore, suggesting that they prefer the pharmacy environment.

A similar pattern emerges among doctors. Attitudinally the majority agree that the pharmacist can give good advice for minor ailments. In practice though, they clearly see the pharmacist's role as limited to the most minor symptoms such as flu (29 per cent) and stomach complaints (41 per cent).

Pharmacists see the opportunity for their role as advice givers to be far greater than at present. For flu and stomach disorders the vast majority believe the pharmacist should be consulted. Some pharmacists, albeit only a minority, see their role as encompassing the treatment of ailments such as sleeping difficulties, headaches, dizziness and the like. Few however, see it extending to more

severe ailments such as chest pains. The finding that both doctors and pharmacists are more in favour of these symptoms being referred to the pharmacist than are the general public, suggests that consumers could be given more education promoting the use of the pharmacist.

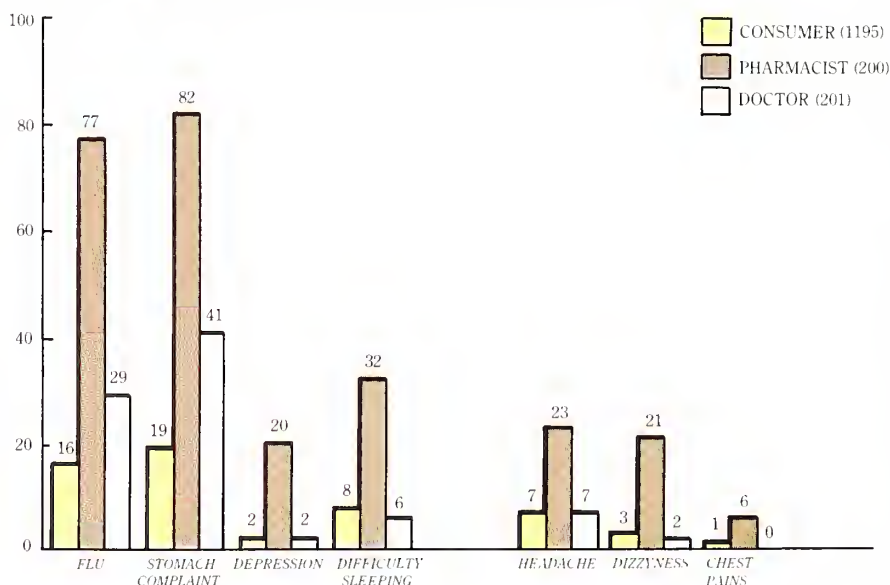
Figure 1 illustrates the huge difference in opinion between doctors, pharmacists and consumers in the type of symptoms they believe could be referred to a pharmacist.

Another aspect of the rejection of traditional norms is the trend towards alternative therapies and natural remedies. Consumers particularly favour natural remedies for sleeping difficulties (26 per cent) and stomach complaints (11 per cent). Pharmacists seem to lag behind consumers and doctors in favouring natural remedies — for example, none would recommend them for stomach complaints — but the importance of these products should not be over-emphasised. For major ailments consumers still turn to doctors.

In conclusion, there is now a greater, albeit limited, faith in pharmacists. People are prepared to take advice from them for minor ailments. If the role of the pharmacist in community healthcare is to expand this increased faith needs to be nurtured through education and further marketing, to increase confidence among the general public.

For the pharmacist to become the first point of contact when minor ailments occur requires further endorsement from other sectors of the medical profession. Support from manufacturers will be required to ensure healthcare rather than general retailing is a viable option for the pharmacist.

**Figure 1. Symptoms to ask a pharmacist for advice about**

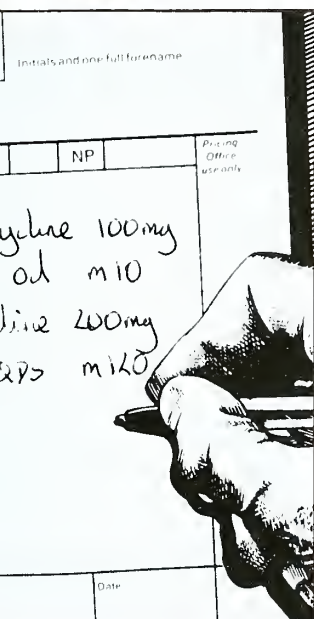


ALL CHOOSING AS A THERAPY OPTION



# Q&A QUESTIONS

**A 74 year old man presents this script for a third successive course of doxycycline plus his regular cimetidine, which he has been taking for at least a year. He appears to be chewing sweets and he wheezily exhales peppermint over you. He has an acute exacerbation of bronchitis which initially failed to respond to a week's course of amoxycillin. The GP tells you that sensitivity tests show doxycycline to be the most appropriate antibiotic.**



1. Assuming the pathogen is sensitive to doxycycline, why might antibiotic therapy have failed?
2. What action do you suggest?
3. What associated factors could be important?
4. Should the antibiotic be changed?

## ANSWERS

1. It is possible that the absorption of doxycycline is being prevented by antacids. The "sweets" are compound magnesium trisilicate tablets; the dose of cimetidine, though outdated, is typical of ulcer prophylaxis and suggests that the use of antacids could be high. However, after taking cimetidine for a year without a change in dose it is more likely that he would be taking cimetidine prophylactically. If he still needs antacids, there should be doubt about its efficacy or his compliance.
2. The key to this problem is counselling. You should counsel the patient against taking antacids at the same time as doxycycline; food and milk do not affect its absorption. In view of his age, his

drug therapy should be explored. Can he read the small print of the label? Why does he need antacids? Is he covertly taking aspirin? Why does he take cimetidine and how good is his compliance with a four times a day dose? The dose of cimetidine should be changed to 400mg twice daily for treatment or 400mg at night for maintenance. Is he experiencing adverse effects which stop him taking either drug?

3. The obvious wheezing, though doubtless worse during an acute exacerbation, suggests that bronchodilator therapy may be inadequate. If he was stabilised on theophylline while taking cimetidine, a reduction in the dose of cimetidine due to poor compliance could, in theory, reduce serum levels of theophylline and compromise efficacy. Theophylline levels might also decline with changes in drinking or smoking habits. The elderly find it difficult to use inhalers correctly, either through inability to co-ordinate activation and inhalation or because they can't depress the aerosol.

4. Given the results of the sensitivity test, there is little point in stopping doxycycline until the possibility of interactions has been excluded. Subsequent antibiotics should be selected on the basis of further sensitivity tests.

# TENSE ABOUT TURNOVER?

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## The present and future...

With regard to the present state of community pharmacy and our efforts to protect and justify the profession, I have read with interest the views of Mr John Merrills, pharmaceutical officer to the Department of Health. Here we have a man whose intentions are apparently to better the rôle of the pharmacist, but in my opinion his ideas belong to "cloud cuckoo land", and can only damage our standing with the Government.

Mr Merrills would like to see pharmacies discard so called non-professionally orientated merchandise, communicate better with GP's, and take steps to improve our professionalism with the expectation that the Government will reward us in due course. Mr Merrills also believes that GP's are now becoming more open to communication with pharmacists and we should make the most of this. Any evidence of this I very much doubt, since in my experience GP's rarely have enough time to see their patients, never mind spend more time talking to us.

Pharmacies traditionally stock a wide range of merchandise for two reasons, one being sales generation and the other being public demand, a phenomenon very close to the Government's heart. Mr Merrills urges pharmacists to take the initiative and discover that in so doing we will be rewarded accordingly rather than expect financial help at the onset.

It must be understood that this Government does not operate in that manner and examples are so numerous they would take pages to mention. From our own point of view we saw no Government help when we computerised our labelling systems some years ago nor do we see any assistance in refitting our dispensaries, etc. We also see the treatment of nurses and the ambulance service, where very little appreciation has been shown by the Government for past services.

At the North West NPA Conference I listened to Mr Merrill's speech with interest and found much of it useful food for thought, but I feel that his representations to civil servants and MPs can only damage our image. It has and will prove difficult to put across our rôle to MPs without time and effort, but our cause is greatest served by convincing our patients to trust us and to consult us first.

We should aim to get the maximum possible number of patients to come to us automatically as their first line

advisor on health matters. Patients still prefer to have medicines made up by the pharmacist as opposed to sold off the shelf. Every bottle of pholcodeine linctus dispensed from the pharmacy with a few words from the pharmacist can be more profitable than any proprietary cough linctus, not to mention the effect on our image within the community.

Simple advice such as this is, I feel, the way to gain the confidence of our public and inquiries into other aspects of their medication and health will follow.

**C Hogg**

Northwich, Cheshire

## Age-old fee problem?

I always enjoy Xrayser's "reflections" because they are usually topical and relevant to what is going on in pharmacy.

So I thought that I would respond to his request to aim a missive in his direction to stimulate debate on the provocative views he expressed in the June 23 issue under "Age factor in practice".

I take his point that in today's increasingly technological profession, all of us must reach the age when we should no longer practise. I shall make that decision myself — in my own good time — only when I feel that it is time for me to consign my pestle and mortar to the attic.

Xrayser is seemingly obsessed with this arbitrary age of

70 years. These days it is generally held that one is most certainly not "clapped-out" at 70, and has a number of useful years left to practise, albeit on a reduced scale. At 76 years I am quite active, and perform about eight hours locum work per week.

Xrayser, being a most sensitive person, cannot really expect the Society to promulgate an age-enforced retirement policy. But if he is really serious about it I would suggest that he joins up with our maverick Council member Mr Tanna who, at the June Council meeting, brainwashed sufficient members to reverse a recommendation of the General Practice and Finance Committee, thus pushing up the proposed over-70 retention fee of £30 (for those in employment), to £99 (full-time) and £55 (part-time) for those over-65.

**Frank Brean**

London SE5

## Want some free advice?

Chemist & Druggist's "Business in Focus" provides subscribers with a free and anonymous review of their business by management consultant John Kerry. The review forms the basis of an article which appears in C&D. If you are interested in having your shop put under the microscope, please write in confidence to the Editor, John Skelton, at Chemist & Druggist, Benn Publications, Sovereign Way, Tonbridge, Kent TN9 1RW, or telephone 0732 364422 for details.



The Farley's "Time for Timers" competition has been won by David Marston (centre), of Marston Pharmacy in Caterham, Surrey, who beat over 3,600 other entrants. Crookes launched the competition in early Spring to coincide with the launch of the Farley's Meal Timers range. Territory manager Pat Sheehan (left) presents Mr Marston with his prize — an antique clock made by the Japy Brothers of France in 1879, the year that Crookes started trading — watched by regional sales manager Steve Ayling





# It's what Retail Pharmacists ring up when they fit Beanstalk

## PRESCRIPTIONS



*R. Parr Dispensing Chemist, Southbourne, Bournemouth.*



*J.M. Lawrence Pharmacy, York, North Yorkshire.*

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Before the advent of product licences, it was much easier to market your own products, either locally or nationally, but it can still be done even now with the right product. A "niche" brand is required, one which offers a better presentation or a reformulation of existing ingredients in a small or neglected market. It is probably beyond the scope of retail pharmacists to invent new molecules!

Veracur gel, my first product, is an example of an improved formulation of an existing treatment for a minor indication for which, at the time, there were few ethical products available — a typical "niche" product in a small market.



*Veracur gel — Typharm's first "niche" product*

At that time the standard BNF treatment for verrucas was to place the foot into a saucer of 3 per cent formaldehyde solution for 20 minutes twice a day. With the average age of patients being 11 years, compliance was a serious problem. By reformulating the formaldehyde solution into a gel — Veracur gel was also, as far as I know, the first ethical pharmaceutical to use the new cellulose gel in place of the old fashioned tragacanth — application became simple, requiring no more than one or two minutes of the patient's time. It is also painless, which cannot be said of many of the alternatives like burning, cutting, freezing or applying acid formulations.

Having invented a new product, the next question was how best to promote it. It was obvious that to sell it as a general counter product would require a large advertising budget and a dedicated sales force, so I decided to promote it as an ethical directly to the medical professional and hope that prescription use would eventually lead to counter sales by pharmacists.

My budget was rather limited, so I used direct mail and advertising in the medical Press, mostly confined to MIMS. I did, however, attend some medical exhibitions — a useful exercise to gain feedback about your product. I also from time to time encourage counter sales by offering bonuses to pharmacists.

One million tubes later I have recently decided to concentrate on promoting Veracur as a Pharmacy only OTC. The De Witt retail sales force has been engaged, and the pack changed to look less like ethical and more like a counter line.

Think of it like this. If you can sell one pack of your product once a week in every UK pharmacy, that's healthy sales figures of around 10,000 packs per week or half a million a year. Imagine if pharmacists got together to sell each other's products on that sort of scale instead of selling other people's product that sometimes end up in supermarkets.

My second product for wider distribution, first produced some 20 years ago, was an attempt to upgrade the formula of the now defunct analgesic, APC tablets, replacing the



## Exploiting the niche market

**From your own dispensary to a national brand. Mike Thornton did it through his company Typharm. He explains how.**

aspirin and phenacetin with the then new paracetamol. This product, Cafadol, again sold as an ethical through the medical professional until it was blacklisted.

It is still available, though it is perhaps a good example of what not to do. The analgesic market is the largest and competition the fiercest. Without a large advertising budget it is better to stick to "niche" products in smaller, perhaps neglected markets, if you can identify one.

My latest product, introduced about seven years ago, is Effercitrate, another reformulation, but this time from a mixture into a tablet. The old potassium citrate mixture has been in the BNF for as long as anyone could remember, but it has always

been particularly distasteful medicine to take. While there was no doubting its effectiveness in the treatment of cystitis, a more pleasant tasting product as needed.

The BNF requires potassium citrate mixture to be freshly prepared. Effervescent tablets, two of which dissolve in water to produce the equivalent of 10ml of potassium citrate mixture, satisfy the requirement for a fresh solution and the fizzy drink produced is quite pleasant to take. Try it!

Again the product was promoted to the medical profession as an ethical, though it can be sold over the counter as a "P" medicine. While similar products generally aimed at the retail side have come along since, I like to think Effercitrate tablets were the first real alternative to potassium citrate mixture.

### You have an idea, what then?

So, what do you do if you have a good idea for a new product? The first step is to discuss the basic concept and formulation with a reputable contract manufacturer. They can give initial advice on the feasibility of production, and on technical matters such as stability testing and possibly the preparation of the forms required for licensing (there are agencies who specialise in preparing product licence applications if necessary).

It is likely that you will require an abridged product licence which now costs some £5,100, so it is as well to get it right first time, otherwise delays will occur in the issuing of the licence, without which you have no saleable product, that is, a product with a specific indication. Products without a specific indication need no product licence.

The services of a good advertising agency are essential in preparing art work for the carton or label (these days not forgetting the bar code). A chat with a good marketing man is useful at the beginning to determine the possibilities of success before you get too deeply involved financially; they may also be able to tell you about Government grants.

At this point, you can have lots of fun putting in your own ideas regarding the name of the product, and everyone seems to give their own theory about how a good advertisement should look.

I did most of these things myself for my own products, but today, with all the new legislation and costs, a joint venture with an established company with expertise in the market you want to break into might be wise.

It is extremely interesting to develop one's own nostrum. When you dispense the first prescription for your own product in your own dispensary it's a day to remember.



*"Effercitrate was the first real alternative to potassium citrate mixture," says Mike Thornton*



# PHARMACY update

## Phenobarb's depressive effect

One of the adverse effects of treating epilepsy with phenobarbitone is depression. In one study in a group of children given phenobarbitone for the first time, the frequency of major depressive disorder was 40 per cent, and 47 per cent exhibited suicidal thoughts. This compared with 4 per cent of children who developed similar symptoms after treatment with carbamazepine.

A two-year follow-up study of this group of children has now found that the depressive symptoms persist for as long as phenobarbitone treatment is continued. Twenty-eight children aged between six and 16 received monotherapy with phenobarbitone or carbamazepine for partial complex or generalised epileptic seizures.

The drugs were equally effective in preventing seizures but children given phenobarbitone scored significantly higher on assessments of depression. Depression tended to improve in five children when phenobarbitone was subsequently discontinued or substituted with carbamazepine, although the degree of change was not statistically significant.

One beneficial effect of successful seizure control was an improvement in cohesiveness and expressiveness within the families. This contrasts with a decline in the children's social competency — for example, dependence on parents — and a 12 per cent frequency of attempted suicide, irrespective of drug treatment. Phenobarbitone should, the authors conclude, be avoided in children with a personal or family history of affective disorder.

*Paediatrics* 1990; 85:1086-91

## Oxybutinin tried for incontinence

Detrusor instability is a common cause of incontinence in women and it becomes more common with age. The detrusor muscle of the bladder contracts in response to parasympathetic stimulation and anticholinergic drugs, such as propantheline, and combined anticholinergic-calcium antagonists like terodiline, are used to increase bladder capacity by blocking this effect.

Oxybutinin is an unlicensed drug with anticholinergic, muscle relaxant and local anaesthetic activity which has recently been assessed in a double-blind placebo-controlled trial in 37 postmenopausal women with detrusor instability. It improved symptoms of urgency and urge incontinence in 62 per cent of women compared with 42 per cent who improved with placebo, a significant difference. However, oxybutinin impaired the voiding contraction and the amount of residual urine in the bladder after micturition increased.

Anticholinergic effects were also significant. Twenty-nine of the 31 women who completed the trial reported dry mouth and this was severe in 26 cases. Other adverse effects included constipation, dry skin, blurred vision and nausea. Six months after the trial, 16 of the women were contacted again. Only seven were still taking oxybutinin, though at a reduced dose, and seven did not want further therapy; the remainder were being treated with other drugs.

Fortunately, say the authors, detrusor instability often remits spontaneously, so that short courses of oxybutinin may be sufficient to relieve the symptoms.

*British Journal of Obstetrics and Gynaecology* 1990; 97:521-6

## Calcium antagonist fights depression

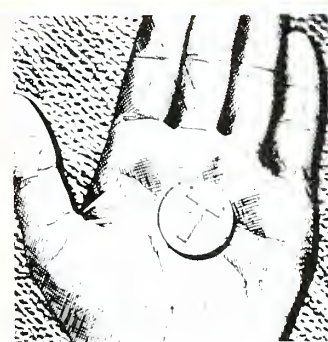
Although there is little evidence from large clinical trials that calcium antagonists possess useful psychotropic activity, reports appear of both beneficial and adverse behavioural effects.

Psychiatrists from Newcastle recently described a woman who suffered depression while taking nifedipine. Although she had a 40 year history of depression, all previous episodes had responded to standard treatments. The current three-year illness proved resistant to antidepressants and ECT. Despite combined treatment, even including fluoxetine, carbamazepine and valproate, her condition was

unchanged. However, when she was admitted following a suicide attempt, she suddenly and inexplicably recovered. This was found to be associated with a gradual reduction in the dose of nifedipine from 40mg to 5mg daily.

Reviewing the histories of 45 patients admitted with severe affective disorder over the previous two years, four recovered after withdrawal of nifedipine, one of whom required no further treatment. Depressed patients should be given an alternative calcium antagonist, it was concluded.

*British Journal of Psychiatry* 1990; 156:889-91



## OC breast cancer risk reviewed

The UK National Case-Control Study Group is continuing to examine the risk of breast cancer associated with oral contraceptives (OCs). In 1989, this group reported that OCs increased the risk in women under 36 years old. Now, it has analysed its data according to various subgroups in an attempt to further define the risk.

The study consists of 755 matched pairs of unaffected controls and women who have had breast cancer. Dividing this group according to reproductive factors such as age at menarche, parity, age at first full-term pregnancy and history of breast feeding, only age at menarche revealed any excess risk, and this was not statistically significant. Further analysis of smoking and drinking, age and history of benign breast disease also failed to reveal any risk factors. Although there was a trend towards a higher risk of breast cancer among women with a family history, this was not significant.

While no consistent pattern of risk could be found, this could be due to the failings of the study. Even such a large group of women may be too small to detect a slight increase in risk associated with OC use. Further, the increased risk of breast cancer due to the interaction between OCs and a past history is multiplicative, not additive. These data reveal no single risk factor but neither do they exclude one.

*Lancet* 1990; 335:1507-9





## Falling apart at the seams?

Topical application of the vitamin A analogue tretinoin improves the appearance of skin which is wrinkly due to excessive exposure to sunlight. In the USA, this has produced a great demand for tretinoin cream for cosmetic improvement. A microscopic study of the skin of six women using tretinoin has now identified a possible mechanism of action.

Double-blind analysis of biopsies taken from the forearm before and after four months' treatment with tretinoin cream revealed an increase in the number of anchoring fibrils. These structures are composed of collagen and occur at the epidermal-dermal junction, where they appear simply to "anchor" one layer of skin to another.

Tretinoin probably produces this increase by inhibiting skin collagenase, an enzyme which degrades the collagen of anchoring fibrils. Since UV light increases the synthesis of collagenase by fibroblasts and keratinocytes in the skin, photo-aging could literally be due to the skin falling apart at the seams.

*Journal of the American Medical Association* 1990; 263: 3057-9

## Cost effectiveness of maintenance cimetidine questioned

Although  $H_2$  antagonists heal most gastric and duodenal ulcers within 12 weeks, maintenance therapy is essential to avoid a high rate of relapse. It is therefore important to examine the cost-effectiveness of these drugs over several years to determine the advantages of continued use. An Australian study suggests the benefits — in economic terms, at least — may be short-lived.

Three hundred patients with healed gastric or duodenal ulcers were randomised to receive maintenance therapy with placebo or cimetidine for three years. Patients given cimetidine experienced fewer days with symptoms and lost fewer days of work through sickness although women tended to respond less well than men. The cumulative ulcer recurrence rate was 22 per cent for gastric ulcers and 29 per cent for duodenal ulcers during treatment with cimetidine,

compared with 40 and 60 per cent respectively with placebo.

However, patients with gastric ulcer appeared to fair worse with the active treatment: they experienced significantly more complications and days in hospital than those given placebo. Overall, although maintenance therapy with cimetidine produced actual savings of \$1200 and \$800 in health care costs over the first two years, costs increased in the third year by \$200. Most costs were associated with endoscopy — which was carried out in response to any major symptoms (persistent dyspepsia, vomiting, haematemesis) — absenteeism and surgery.

Maintenance therapy with cimetidine is therefore justified for the first two years after the initial ulcer was healed but there seems to be no cost advantage subsequently.

*Gastroenterology* 1990; 99:27-35

## Cyclosporin tried for multiple sclerosis

Multiple sclerosis is one of the commonest causes of neurological disability among young adults. Although the cause remains elusive, there is evidence that the characteristic demyelination of the nerves may be mediated immunologically. That is the rationale for a major double-blind trial with the immunosuppressant cyclosporin, which began in 1985 and has only now been reported in full.

More than 500 people with severe and progressive multiple sclerosis were randomised to receive cyclosporin or placebo. The dose of cyclosporin was adjusted to produce a trough blood level within the range 300-500 ng/ml and adjusted according to the development of any adverse effects such as nephrotoxicity. Other drugs and any changes in physiotherapy regimes were excluded.

Just over half of the patients treated with cyclosporin completed two years' treatment compared with 68 per cent of those given placebo. The only significant differences in withdrawal rates were due to lack of effect in the placebo group and adverse effects in the cyclosporin group. Cyclosporin reduced the probability of becoming

wheelchair-bound during the study period and delayed progression of neurological disability. However, it had no significant effect on the impairment of daily living — for example, feeding and dressing — or on the time of sustained progression of the disease. Overall, both patients and doctors rated cyclosporin superior to placebo. Severe adverse reactions to cyclosporin, which included nephrotoxicity, hirsutism, hypertension and gingival hyperplasia, were common.

The study therefore shows that cyclosporin achieves a modest delay in the development of multiple sclerosis at the risk of serious toxicity which requires close supervision. It is not known whether the benefits achieved after two years will be sustained with continued treatment.

*Neurology* 1990; 27:591-605

## Low uptake of flu vaccine

Influenza is associated with between 2,000-8,000 deaths annually. Recently, campaigns have aimed to improve the uptake of flu vaccine among patients most at risk, notably the elderly, particularly those in closed communities. However, uptake of flu vaccine has been relatively low, in spite of the supply shortages during last year's epidemic.

A survey of nearly 500 geriatricians in the UK has found that 80 per cent never used the vaccine for elderly patients on continuing care wards. They believed it was inappropriate, unnecessary, too expensive or ineffective and some believed it would be harmful.

Indications which were acceptable to some consultants included chronic chest disease, renal disease, diabetes and heart disease. Only 3 per cent of consultants routinely offered vaccination and 16 per cent prescribed it only for some patients.

These findings go against the perceived wisdom about using flu vaccine but in one unit a small scale prospective study of 66 patients with influenza-like illness during the Winter of 1986-87 showed that infection could be proved in only a few. Only three of 17 successful viral cultures proved to be influenza.

*Age and Ageing* 1990; 19:169-72

## 'QALYs' examined

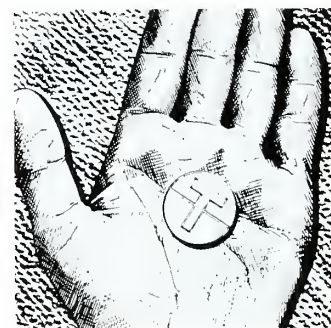
The quality-adjusted life year (QALY) is a tool to aid the rational allocation of health resources which is now being evaluated. It attempts to place a numerical value on medical intervention by estimating the additional years of life gained through treatment, according to the quality of life a patient then experiences. A year of perfectly healthy life has a QALY of 1; a year with chronic debility due to adverse effects or exercise intolerance may score 0.8. When cost is included in the analysis, the cost-effectiveness of the intervention can be measured and this can be used to develop priorities in health care.

QALYs apply consistent standards to cost analysis which are useful — but still controversial — in allocating scarce resources. However, according to a review by American doctors, their use at the bedside is dangerous. Estimates of quality of life are based on the opinions of people given hypothetical problems: for example, how do they rate life with impaired activity, impotence or chronic fatigue? Effectively, decisions on whether and how to treat would be taken away from the patient or the doctor and made by society instead.

As recent research has shown, healthy people do not share the perceptions of risk and benefit held by patients. In London, a group of patients with cancer were asked what chance of success they would expect if they accepted treatment which caused serious adverse effects. Patients were prepared to undergo intensive chemotherapy for a 1 per cent chance of cure or a one in ten chance of symptom relief. By comparison, healthy people expected a 50 per cent chance of cure and a 75 per cent chance of remission.

*Journal of the American Medical Association* 1990; 293:2917-21

*British Medical Journal* 1990; 300:1458-60



*Research Digest* is a regular series written by drug information specialist Steve Chaplin MRPharmS, looking at current developments in medicine.



# BUSINESS NEWS

## Retailers urged to seek regional profile

Chains of nationally uniform stores are no longer the best way to attract local shoppers, according to market research analysts, Mintel.

Their report on regional retailing, identifies the need for small chains to be developed either regionally or across selected regions to make them more flexible to local market conditions. In particular, the mortgage burden for home owners in the North, Yorkshire and Humberside being around 40 per cent below the national average, has increased their retail spending power compared to consumers in the South.

The report highlights a number of regional variations, for example people in the South East spend the most on personal goods, and two in five shoppers want to shop at stores which have local character, something which one in five believe too few have. Regional retailing — retail analysis special report (£650). Mintel Publications. Tel: 071-606 6000.

## C&D Directory

Subscribers are reminded that the *Chemist & Druggist* Directory will be closing for press on September 3. Please return your editorial entry form, whether amended or not, to Sarah Walker, production editor at Benn Business Information Services, PO Box 20, Sovereign Way, Tonbridge, Kent TN9 1RQ, as soon as possible.

If you are in doubt as to whether you received a form, or if you wish to be entered for the first time, please, ring Sarah Walker on 0732 362666 ext 2837 immediately.

## Savory & Moore fined in safety at work case

A recent court case in which Savory & Moore were fined £1,250 has highlighted Health and Safety at Work Act requirements to report accidents within seven days. The company was fined by magistrates after a cosmetics supervisor at the Bicester shop hurt her back while lifting boxes.

The Act says that all injuries at work which put the employee off work for more than three days or into hospital for 24 hours or more must be reported in writing to the enforcing authority — in the case of pharmacies the local authority — within seven days.

In the Savory & Moore case Bicester magistrates heard that the company had twice failed to report accidents in which Jacqueline Stuart, who had not been trained how to lift heavy things properly, hurt her back.

The company pleaded guilty to two charges of failing to report accidents which resulted in Mrs Stuart being off work from their Bicester branch in Sheep Street for more than three consecutive days. The company also admitted a charge of failing to train Mrs Stuart in lifting heavy items.

Mr Peter Wilson, prosecuting on behalf of Cherwell District Council, said Mrs Stuart hurt her back while lifting boxes in the storeroom weighing between 18 and 20 kilograms. The shop had not reported the accident although it was required to do so within seven days under the Health and Safety at Work Act. After Mrs

Stuart returned to work she continued lifting boxes.

"She suffered another accident which kept her off work for eight weeks with torn ligaments in her back and damage to nerves at the base of her spine," Mr Wilson said.

Thirteen days later the branch informed the council of the accident by phone. But a report of the accident in written form should have been sent to the council at least six days earlier.

Mr Robin Jenner, director of Savory & Moore Ltd, said that as a health care company it went to great lengths to ensure all health and safety procedures were observed. All staff were trained in lifting techniques but Mr Jenner accepted that Mrs Stuart had "slipped through the net" and had not received the correct training.

Mrs Stuart had been trained since she had returned to work and was still with the company.

■ Injuries which must be reported under the Act include the fracture of the skull, spine or pelvis; the fracture of any bone in the hand, leg or ankle but not a bone in the foot. The list also includes unconsciousness, burns, loss of sight of an eye, various acute illnesses and death.

Two free leaflets are available from the Health & Safety Executive: "Reporting an Injury and Dangerous Occurrence" and "Reporting a Dangerous Disease".

## Cosmetics labelling

An amended Directive proposed by the European Commission is expected to require all member states to introduce full ingredient labelling for cosmetics, Consumer Affairs Minister Eric Forth revealed last week.

A parliamentary motion tabled by the Northern Ireland MP, the Rev Martyn Smyth, with cross-party back-bench support, endorses the concern expressed by the British Association of Dermatologists about the number of patients who suffer reactions to substances applied to the skin.

The motion calls on manufacturers in the UK to implement full labelling of the qualitative composition of products, similar to the Cosmetics Toiletry & Fragrance Association system used in the USA.

In the UK, the Cosmetic, Toiletry and Perfumery Association supports the concept of full ingredient labelling provided there is harmonisation of the system across Europe and providing the American system is adopted.

Director Marion Kelly told C&D: "We know the American system works across all classes of products, it has certain exemptions for very small products and requires ingredients to be listed on the outer packaging, not the inner."

## Not yet...

Mrs Margaret Thatcher, the Prime Minister, confirmed in the Commons last week that the Government would not introduce legislation to reform the Sunday trading laws in England and Wales before the next general election.

She again made it clear that before launching a new bill the Government would require assurance from those Conservative backbenchers who helped to defeat the measure introduced in 1986, that an acceptable compromise had been established.

## Animal tests campaign

European animal rights activists are stepping up their fight against animal tests for cosmetics and toiletries, with a new international campaign.

The British Union for the Abolition of Vivisection (BUAV) says it has gained the support of the International Fund for Animal Welfare and groups from West

Germany and Holland. To coincide with the forthcoming updated European cosmetics Directive, the groups will distribute leaflets, posters and postcards.

The groups are also organising petitions to the European Parliament and Commission, and advertising, publicity events and political lobbying are planned.



## Amersham lose matrix

Amersham International have abandoned the matrix management structure they introduced just three years ago. The post of divisional chief executive is to go, stripping out an entire line of senior management between the board and the group's businesses.

The matrix management structure was introduced following advice from management consultant McKinseys, but is now seen as too complex and overweight for an organisation of Amersham's size.

The new structure is based on research, manufacturing, commercial and personnel responsibilities across the group, and is intended to provide clear accountability for the activities at board level.

"The intention of the restructuring is to make the businesses simpler and more directly accountable to their customers," the spokesman said.

Amersham emphasises the restructuring is not part of a cost cutting exercise, and said that there would be categorically no redundancies associated with the move.

Three new members are joining the company's board, which increased from eight to 11 members. Ed Gallagher, 45, currently the chief executive of the life sciences business will be director of manufacturing. Gareth Griffiths, 58, becomes the director of personnel and corporate affairs. Ron Long, 43, is to join the group from Wellcome's Calmic International where he has been the managing director, to be the new commercial director. The new directors will be appointed to the board on August 9.

In addition, Dr John Maynard, 58, will become director of research and development.



Sir Geoffrey Howe, deputy Prime Minister, recently visited the European headquarters of Nice-Pak Products in North Wales. Sir Geoffrey is shown with Keith Raffan, MP for Delyn, North Wales (left) and Robert Julius, president of Nice-Pak Products Inc (right)

## EC bad for biotechnology

Europe is not a favourable environment for biotechnology companies, say the European Chemical Industry Federation (CEFIC), and commercial investment could go to Japan or the US. Meanwhile Genentech, still engaged in merger negotiations with Roche Holdings, have announced a drop in second quarter earnings.

The CEFIC claims that the EC suffers from an incoherent adversarial regulatory system which makes the costs and risk associated with EC investment unacceptable. Just 3 per cent of the investment in biotechnological resources went to the EC, though some 82 per cent of investment came from European sources, they say.

The fall in Genentech's profits has been attributed to expenses

related to the Roche merger. The company is anticipating a loss for the year because of these costs.

□ EC directives on laboratory and biotechnology regulations are described in "The impact of new and impending regulation on UK biotechnology" by Cambridge Biomedical consultants. Tel: (0223) 61624.

## Retail sales fall in June

The volume of retail sales fell 2.8 per cent in June while the retail price index rose 0.4 per cent. The provisional results published by the Central Statistical Office come as the Confederation of British Industry warn there is no immediate prospect of an improvement in retail trade.

The drop in retail sales volume, calculated on provisional, seasonally adjusted figures is nearly 2.8 per cent compared to May. However, an early reduction in interest rates is thought unlikely. Sales in the three months to June were up 0.5 per cent on the previous three months and up 1.5 per cent on the same period last year.

According to the latest CBI/FT survey of distributive trades, retailers continue to be hit by the squeeze on consumer demand. It predicts only modest sales increases in July, with wholesaling fairs worse than the retailing sector.

## BUSINESS BRIEFS

**Sangers** have increased their sales force, made a key promotion, and increased the trading space of their Birmingham headquarters by 25 per cent.

With the creation of a new trading floor on the mezzanine level, Mark Allwood has been promoted to wholesale marketing manager. He will be assisted by Simon Houghton.

The company has increased their telesales force with Dawn Morris as supervisor.

**Sandoz**, the Swiss pharmaceuticals and chemicals group, have announced a 3 per cent increase in turnover for the first half of the year. The company expects earnings and returns to at least match those of 1989. Pharmaceuticals was the strongest sector, with above average sales in the US and some European countries, while price reductions in Japan had reduced the sales value.

**The Seton flotation** (C&D July 14, p81) saw a successful first day's trading with the shares opening at 143p and receiving support up to 150p. The shares were placed at 130p.

**Rhône-Poulenc** are to sell one of their UK chemical plants to Bayer for £56m. The plant in Selby, North Yorkshire, which manufactures citric acid, was acquired by Rhône-Poulenc last year when they purchased the chemicals division of RTZ.

**Broad Oak Pharmacies**, the pharmacy investment scheme floated under the Business Expansion Scheme earlier this year has "achieved the first objective for investors," by having two pharmacies fully invested and trading. This allows the investors to claim the 40 per cent tax relief BES allows on investments. The two pharmacies are Tyrrell and Jones in Whitstable and Warrior Pharmacy in St Leonards.

## COMING EVENTS

**Arthur Anderson & Co.** "VAT and retail" half day seminar on July 26 at 2 Arundel Street, London WC2. Details from Nicola Bouch on 071-438 3941.

**Tolley Conferences.** "Payroll manager's review", including recent changes in NI legislation and employment law, at the London Press Centre, September 5. Details from Heather Johnson on 081-686 9141.

"Using research for marketing in the 90's", the 43rd ESOMAR marketing research congress and exhibition, Monte-Carlo, September 16-20. Contact the ESOMAR Central Secretariat, The Netherlands. Tel: +31-20-664 2922.

**The Joint European Standards Institute.** "The European quality systems standards, a route to the CE mark after 1992" Nice, September 24-26, Fees £625. Details from Vanessa Darnborough. Tel: 071-236 4080.

## Fine for too little garlic

Hofels Pure Foods have been fined for supplying garlic pearls carrying false trade descriptions.

Telford magistrates heard recently that the labelling on a packet of garlic pearls stated that one pearly equalled six garlic cloves and that the oil was prepared from over 3,000 times its own weight of fresh garlic cloves. When trading standards officers sampled the product, bought from Holland & Barrett in Telford, they found that one pearly was only equivalent to between two and four cloves.

The company was fined £250 on each offence, with £490.75 costs.

Seven Seas' marketing manager Rob Elliott told C&D that the clove equivalency claim was deleted, and the wording altered as soon as the company realised there was a problem. Revised packaging has been issued since early June. The court did not ask the company to withdraw existing product so there is no need for pharmacists to obtain replacement stock, he added.



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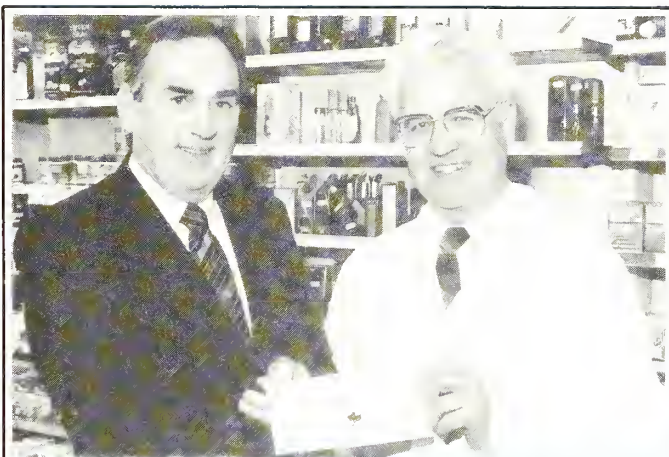
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# ABOUT PEOPLE



Pharmacist Ken Leak (right) of Durham Road, Gateshead, Newcastle, is presented with free air tickets to San Diego won in a Unichem competition, by Ray Durey, manager of the Newcastle branch. Mr Leak won his prize by correctly identifying uncaptioned photographs of trees with their species

## Traffic change petition

Pharmacist Ian Strachan has helped organise a 400 name petition calling for road safety measures outside his shop in Denton, Manchester.

"In particular, elderly people can take up to 15-20 minutes to get across the road," said Mr Strachan, manager of Gordon

Chemists. He believes a pelican crossing is the answer, to connect the mainly residential area on one side of the road with the doctor's surgery, school and factories opposite.

The local council have said they will undertake a traffic flow survey and review the situation.

## A hole in one for Les

NPA board member Les Calvert got a hole in one at the NPA's invitation golf day last week.

In the morning 22 guests teed off on the Duke's Course at Woburn Golf and Country Club in Bedfordshire, and in the afternoon they played a Texas Scramble on the Duchess Course.

Les' ace on the famous rhododendron hole was the highlight of the day. His prize was a watercolour of the hole.

The Texas Scramble was won by a team made up of Hampshire pharmacist Tony Leach, NPA board member Alan Facer, former PSNC representative Bob Onley, and John Edmundson.

## MPS and LLB

A community pharmacist who has always regretted his career master's advice to study pharmacy instead of law, took the decision to enrol for a part time law degree at the age of 39.

Now, five years later, Peter Herman of Peters Pharmacy, Paddington Street, London W1, has gained an LLB (hons) from the Polytechnic of Central London.

Mr Herman, who graduated in pharmacy from Chelsea College in 1967, says he would definitely recommend further studies. When asked how the two degree courses compared, Mr Herman thought the pharmacy degree, with its practical content, to be the most taxing. He is currently considering how best to utilise his dual qualification.



Ronald Platt, managing director of Carronshore Marketing International/Scottish Fine Soaps, is pictured with his area manager, Miss Wendy Stafford (right), presenting first prize of a holiday to Italy for two for two weeks to Mrs Jean Oultram of Hampson's Chemist, Leigh. Mrs Oultram won the holiday with her window displays of Perlier natural recipes and Pino Silvestre

## APPOINTMENTS

**Cyril Ashley OBE DL**, the recently retired chairman of L'Oreal, has been unanimously elected honorary life president of the Cosmetic, Toiletry & Perfumery Association. Mr Ashley, who started his career in the industry in 1936, was with L'Oreal for 37 years, the last 13 as chairman. **Cussons UK Ltd** have appointed Mike Fallon, previously head of sales, as sales director, and Phil Smith as marketing director. Bob Jones, who was sales and marketing director for the past year, is

appointed as managing director, replacing Keith Herbert. He moves to the board of Cussons International plc.

**Jean Patou Ltd** have appointed Mary Thompson-Brooks as general manager and David Hope, previously area sales manager, as sales manager of the Jean Patou Division.

**Retail Concepts Ltd** have appointed Ray Vaughton as general sales manager. He was previously responsible for the national account operation.

*Fiona Canham, a pre-registration student of Great Yarmouth and Wenev District receives the Pat Andrews Award for the greatest professional progress made during the year by an East Anglian Region graduate. Mrs Osman, president of the King's Lynn branch of the Business and Professional Women's Federation who initiated the award, made the presentation. Ms Canham is based at the James Paget Hospital, Great Yarmouth.*





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